

illusions about the scale of the effort required to get the job done. It is an effort, however, that must be made. Considerable opposition to Saddam and his family exists inside Iraq and, particularly, among exiled dissident groups. The Administration should organize a more concerted effort at unifying these dissident elements and providing the logistical support needed to bring about the collapse of Saddam's regime. Financial support toward this end is already at hand in the form of Iraqi assets frozen after its invasion of Kuwait. The current and future Administrations should budget appropriately for the costs of such an operation within the international operations discretionary portion of the federal budget—not out of a defense budget already suffering the effects of seeing resources diverted to various contingency operations.

I do not adopt this stance lightly. On the contrary, I wish there were another way, but I know there is not. I regret very much that American personnel may lose their lives in any military operation we conduct against Iraq and I mourn the loss of those innocent Iraqis who want nothing more than to live in peace. But Saddam Hussein has left us no choice.

Mr. President, it is imperative that this body convey to the President the support he needs in this time of domestic political crisis to employ the level of force necessary to bring closure to the situation with Iraq. For that to happen, though, the President should ask Congress for its support, not just welcome it if and when it comes. Politics stops at the water's edge, it is often said in discussions of foreign policy. We are at the water's edge, and the currents are threatening to sweep away U.S. credibility in the very region where we can least afford for that to happen. Vital U.S. interests are at stake, and it is time to act.

I yield the floor.

AID TO AFRICA

Mr. ASHCROFT. Mr. President, I rise today to acknowledge and honor the achievement of Assist International, World Serv, the Hewlett Packard Foundation, and the Erie Area Chamber of Commerce in delivering medical aid to the people of Ethiopia. This group of organizations has worked to provide medical equipment to Ethiopia that can save hundreds of lives. This generous gift, valued at over one million dollars, will bring hope and health to many in Ethiopia.

These organizations and the concerned Americans associated with them have demonstrated the true spirit of charity. The group cooperatively has donated a state-of-the-art cardiac heart monitoring unit to the Black Lion Hospital—Ethiopia's leading teaching medical facility. In addition to the cardiac unit, beds, mattresses, and other system support equipment will be provided.

World Serv and Assist International have a strong history of providing hu-

manitarian aid to relieve human suffering in needy countries. Assist International donated medical equipment to a site in Mongolia which was then approved by the World Health Organization to perform open heart surgery. The Hewlett Packard Foundation donated the medical equipment in the Black Lion Project in its goal to ease human suffering internationally. Finally, the Chamber of Commerce of Erie, Pennsylvania, has joined together with the other organizations and has raised the funding for transportation, installation, and training costs of this project. Specifically, I commend the Erie Area Chamber of Commerce for this cooperative effort and for holding the third annual "Aid to Africa" banquet to raise funds for humanitarian projects.

The Black Lion project is an example of the compassion and generosity that other countries appreciate and admire in the United States. It gives me great pleasure as the chairman of the Senate Foreign Relations Africa Subcommittee to know that Americans are finding ways within the private sector to aid other countries in Africa. It is my pleasure to ask the members of the Senate to join me in recognizing and honoring the work of the members and staff of Assist International, World Serv, the Hewlett Packard Foundation, and the Erie Area Chamber of Commerce.

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

EXECUTIVE SESSION

NOMINATION OF DAVID SATCHER, OF TENNESSEE, TO BE AN ASSISTANT SECRETARY OF HEALTH AND HUMAN SERVICES, MEDICAL DIRECTOR OF THE PUBLIC HEALTH SERVICE, AND SURGEON GENERAL OF THE PUBLIC HEALTH SERVICE.

The PRESIDING OFFICER. The clerk will report the business pending before the Senate.

The legislative clerk read the nomination of David Satcher, of Tennessee, to be an Assistant Secretary of Health and Human Services, Medical Director of the Public Health Service, and Surgeon General of the Public Health Service.

The PRESIDING OFFICER. Who yields time?

Mr. ASHCROFT addressed the Chair.

The PRESIDING OFFICER. The Senator from Missouri is recognized.

Mr. ASHCROFT. Mr. President, I yield myself as much time as I may consume.

Mr. President, the nomination of David Satcher for U.S. Surgeon General has been a matter of significant discussion over the last several days. I would like to indicate that I rise to oppose this nomination. There are a number of very important reasons why I be-

lieve we should not confirm this nominee.

During the last several days of discussion here on the Senate floor, we have gone through a number of topics, none of which reveals a record that would recommend Dr. Satcher to be the Surgeon General of the United States of America, none of which would say that this individual ought to be America's family doctor.

We looked at the Third World AIDS studies that have been conducted and that are ongoing under Dr. Satcher's supervision at the Centers for Disease Control. You will remember that those Third World AIDS studies were the subject of an editorial in the New England Journal of Medicine, which has simply said that those studies are not being ethically conducted, that as a matter of fact, the studies were unethical. In short, the New England Journal of Medicine says that to give people sugar pills, or placebos, when there is a clearly understood and accepted therapy that is available, pharmaceutically or otherwise, is unethical, and that has been the position of the CDC in this situation. They have simply persisted with the administration of placebos, or sugar pills, for individuals, in spite of the fact that there is proven therapy available that should be or could be given to those individuals. It has been clear, even in the words, I believe, of Dr. Satcher himself, that these are studies that could not be conducted in the United States. It is simply that we don't treat human beings as laboratory subjects—to give them a placebo when there is a known therapy in this country. So the first thing we discussed pretty substantially last week were the Third World AIDS studies. In these studies the activities of the CDC, under Dr. Satcher, had been labeled conclusively, in my judgment, and at least very strongly by the New England Journal of Medicine, as unethical. They were called unethical because, in the face of known therapy, individuals were just given sugar pills, even though we know that an infection or a virus like HIV is often considered a fatal virus.

The second item of concern related to the way in which Dr. Satcher has conducted himself as the head of the CDC has related to domestic newborn AIDS studies. In the eighties, there was a program to test the blood of newborn infants. It was a test that was conducted after identifying marks were taken off the blood samples so that researchers just found out what percentage of the samples were HIV-infected. Researchers kept that for epidemiological reasons or for statistical purposes, in order to find out in a particular community what percentage of the newborns were being born with HIV.

Now, since that study began, and during the pendency of Dr. Satcher's tenure at Centers for Disease Control, new